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| UTILITY PATENT APPLICATION TRANSMITTAL | | Attorney Docket No. 511.41182X00 | |
| | | First Inventor HIRAI, YASUYUKI | |
| | | Title RESIN COMPOSITION, AND USE AND METHOD FOR PREPARING THE SAME | |
| (Only for new nonprovisional applications under 37 CFR 1.53(b)) | | Express Mail Label No. | |

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| APPLICATION ELEMENTS SEE MPEP chapter 600 concerning utility patent application contents. | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 |
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| | |
|--|---|
| 1 <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>Submit fee with application, including fee for publication, if applicable.</small> 2 <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27 3 <input checked="" type="checkbox"/> Specification [Total Pages 31] <small>Submit specification with application, including drawings, if applicable.</small> -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R & D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure 4 <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Pages _____] 5 Oath or Declaration [Total Pages 2] a <input checked="" type="checkbox"/> Newly executed (original or copy) b <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) 6 <input type="checkbox"/> Application Data Sheet See 37 CFR 1.76 | 7 <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8 Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a <input type="checkbox"/> Computer Readable Form (CRF) b <input type="checkbox"/> Specification Sequence Listing on i <input type="checkbox"/> CD-ROM or CD-R (2 copies), or ii <input type="checkbox"/> paper c <input type="checkbox"/> Statements verifying identity of above copies |
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|---|
| ACCOMPANYING APPLICATION PARTS |
| 9 <input checked="" type="checkbox"/> Assignment Papers (cover sheet & documents(s)) 10 <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee) 11 <input type="checkbox"/> English Translation Document (if applicable) 12 <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Citations Statement (IDS) PTO-1449 13 <input type="checkbox"/> Preliminary Amendment 14 <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15 <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16 <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i) Applicant must attach form PTO/SB/35 or its equivalent. 17 <input checked="" type="checkbox"/> Other Credit Card Payment Form |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. _____

Prior application information Examiner _____ Group Art Unit _____

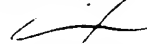
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

| | | |
|--|---|--|
| <input type="checkbox"/> Customer Number or Bar Code Label | 020457 (Insert Customer No. or Attach bar code label here) | or <input type="checkbox"/> Correspondence address below |
| Name ANTONELLI, TERRY, STOUT & KRAUS, LLP | | |
| Address _____ | | |
| City _____ | State _____ | Zip Code _____ |
| Country _____ | Telephone (703) 312-6600 | Fax (703) 312-6666 |
| Name Carl F. Brundidge | Registration No. (Attorney/Agent) 29,621 | |
| Signature _____ | Date February 13, 2002 | |

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| FEE TRANSMITTAL for FY 2002 | | | | Complete if Known | | | |
|---|-----------------------|-----------------------|-----------------------|-----------------------------|--|----------------------------------|--|
| <i>Patent fees are subject to annual revision.</i> | | | | Application Number | | | |
| | | | | Filing Date | | February 13, 2002 | |
| | | | | First Named Inventor | | HIRAI, YASUYUKI | |
| | | | | Examiner Name | | | |
| | | | | Group Art Unit | | | |
| TOTAL AMOUNT OF PAYMENT | | (\$) | | 1,060.00 | | Attorney Docket No. 511.41182X00 | |
| METHOD OF PAYMENT | | | | FEE CALCULATION (continued) | | | |
| 1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit overpayments to: Deposit Account Number 01-2135 Deposit Account Name Antonelli, Terry, Stout & Kraus, LLP <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant Claims small entity status See 37 CFR 1.27 | | | | 3. ADDITIONAL FEES | | | |
| 2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other | | | | | | | |
| FEE CALCULATION | | | | | | | |
| 2. BASIC FILING FEE | | | | | | | |
| Large Fee Code | Entity Fee Code | Small Fee Code | Entity Fee Code | Fee Description | Fee Paid | | |
| 101 | 740 | 201 | 370 | Utility filing fee | 740.00 | | |
| 106 | 330 | 206 | 165 | Design filing fee | | | |
| 107 | 510 | 207 | 255 | Plant filing fee | | | |
| 108 | 740 | 208 | 370 | Reissue filing fee | | | |
| 114 | 160 | 214 | 80 | Provisional filing fee | | | |
| SUBTOTAL (1) | | | | 740.00 | | | |
| 1. EXTRA CLAIM FEES | | | | | | | |
| | | Extra Claims | Fee from below | | | Fee Paid | |
| Total Claims 20-20** = 0 | | x 18 | | | = 0 | | |
| Indep. Claims 3-3** = 0 | | x 84 | | | = 0 | | |
| Multiple Dependent | | 280 | | | = 280.00 | | |
| Large Fee Code | Fee Code | Entity Fee Code | Small Fee Code | Entity Fee Code | Fee Description | Fee Paid | |
| 103 | 18 | 203 | 9 | | Claims in excess of 20 | | |
| 102 | 84 | 202 | 42 | | Independent claims in excess of 3 | | |
| 104 | 280 | 204 | 140 | | Multiple dependent claim, if not paid | | |
| 109 | 84 | 209 | 42 | | ** Reissue independent claims over original patent | | |
| 110 | 18 | 210 | 9 | | ** Reissue claims in excess of 20 and over original patent | | |
| SUBTOTAL (2) \$ | | | | 280.00 | | | |
| **or number previously paid, if greater. For Reissues, see above | | | | | | | |
| | | | | Other fee (specify) _____ | | | |
| | | | | SUBTOTAL (3) (\$) 40.00 | | | |

| SUBMITTED BY | | Complete (if applicable) | | | |
|-------------------|---|----------------------------------|-------------------|-----------|--------------|
| Name (Print/Type) | Carl I. Brundidge | Registration No (Attorney/Agent) | 29,621 | Telephone | 703-312-6600 |
| Signature |  | Date | February 13, 2002 | | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.